

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUSPEND AND RESUME WORK ORDER

Certified/Registered Mail; Return Receipt Requested

Issuing Office

Date

Contract Number

Contract Name

INSTRUCTIONS

Use Certified or Registered mail, or hand deliver. Send or give original to contractor. Distribute other copies after noting date of receipt.

Notice Number

THIS IS YOUR NOTICE TO SUSPEND OR RESUME WORK ON ABOVE CONTRACT AS NOTED BELOW:

SUSPENSION OF WORK - Effective Close of Business (Date): _____

Type of Suspension: Total Partial (Do not resume work until you are notified to do so in writing.)

Reason for Suspension: _____

RESUMPTION OF WORK - Effective Beginning of Business (Date): _____

Remarks: _____

(Authorized Signature)

**CONTRACTOR'S ACKNOWLEDGEMENT
WHEN DELIVERED IN PERSON**

(Name and Title)

(Signature of Recipient)

(Contractor's Name)

(Date)

**BLM REPRESENTATIVE COMPLETES
WHEN DELIVERED BY MAIL
Attach signed return receipt to contract file copy.**

Notice to Proceed received on the _____ day of _____, 20 ____.

Contractor

CO

COR

Finance

P1